
SEVERN
TRENT
SERVICES

Severn Trent Laboratories, Inc.

STL-4124 (0700)

Client Haley + Aldrich	Project Manager Dish Farnum	Date 2-7-07	Chain of Custody Number 049880
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Address	Telephone Number (Area Code)/Fax Number	Lab Number	Page <u>1</u> of <u>1</u>
9040 Friars Rd	(619) 280-9210	E2B070211	

City San Diego	State CA	Zip Code 92108	Site Contact	Lab Contact	Analysis (Attach list if more space is needed)
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[illegible]

Contract/Purchase Order/Quote No.	Matrix	Containers & Preservatives	Conditions of Receipt
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Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Air	Aqueous	Sed.	Soil	Unpres.	H ₂ SO ₄	HNO ₃	HCl	NaOH	ZnAc/ NaOH	TPH	8260C	8310C	Metals
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[illegible]



Source DD-2 e3'-020702	2- 8 7-02	12:55		x	2					HOLD, until P.L.F.
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Possible Hazard Identification					Sample Disposal			(A lee may be assessed if samples are retained longer than 3 months)
<input type="checkbox"/> Non-Hazard	<input type="checkbox"/> Flammable	<input type="checkbox"/> Skin Irritant	<input type="checkbox"/> Poison B	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Return To Client	<input checked="" type="checkbox"/> Disposal By Lab	<input type="checkbox"/> Archive For _____ Months	

Turn Around Time Required ☐ 24 Hours ☐ 48 Hours ☐ 7 Days ☐ 14 Days ☐ 21 Days ☐ Other _____

QC Requirements (Specify) _____

1. Relinquished By 	Date 2-7-02	Time 16:25	1. Received By 	Date 2-7-02	Time 16:25
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2. Relinquished By	Date	Time	2. Received By	Date	Time
					

3. Relinquished By	Date	Time	3. Received By	Date	Time
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Comments

DISTRIBUTION: WHITE - Stays with the Sample; CANARY - Returned to Client with Report; PINK - Field Copy

BOE-C6-0002884

STL Los Angeles
Condition Upon Receipt Anomaly Report (CUR)



Client: Haley & Hochstadt Date/Time: 2/7/02
Lot No: E2B 070277 Initiated by: DR 17:00

Affected samples	Chain of Custody #
Client ID <u>On the COC</u>	Lab ID
Source <u>AD 203-070702 @ 12:55</u>	Analyses Requested <u>On the label:</u> <u>(One out of two)</u>
	Source <u>AD 203-070702 @ 12:55</u>

CONDITION/ANOMALY/VARIANCE (CHECK ALL THAT APPLY):

<ul style="list-style-type: none"> ● COOLERS <ul style="list-style-type: none"> <input type="checkbox"/> Not Received, No (COC) <input type="checkbox"/> Not Received but COC (s) Available <input type="checkbox"/> Leaking <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> ● CUSTODY SEALS (COOLER(S)/CONTAINER(S)) <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Not Intact <input type="checkbox"/> Other: _____
<ul style="list-style-type: none"> ● TEMPERATURE (SPECS $4 \pm 2^{\circ}\text{C}$) <ul style="list-style-type: none"> <input type="checkbox"/> Cooler Temp(s) _____ <input type="checkbox"/> Temperature Blank(s) _____ 	<ul style="list-style-type: none"> ● CHAIN OF CUSTODY (COC) <ul style="list-style-type: none"> <input type="checkbox"/> Not relinquished by Client; No date/time relinquished <input type="checkbox"/> Incomplete information provided <input type="checkbox"/> Other: _____
<ul style="list-style-type: none"> ● CONTAINERS <ul style="list-style-type: none"> <input type="checkbox"/> Leaking <input type="checkbox"/> Broken <input type="checkbox"/> Extra <input type="checkbox"/> Without Labels <input type="checkbox"/> VOA Vials with Headspace _____ mm <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> ● CONTAINERS LABELS <ul style="list-style-type: none"> <input type="checkbox"/> Not the same ID/info as in COC <input type="checkbox"/> Incomplete Information <ul style="list-style-type: none"> <input type="checkbox"/> Preservative <input type="checkbox"/> Collection _____ Time _____ Date <input type="checkbox"/> Markings/Info illegible <input type="checkbox"/> Torn <input type="checkbox"/> Other: _____
<ul style="list-style-type: none"> ● SAMPLES <ul style="list-style-type: none"> <input type="checkbox"/> Samples NOT RECEIVED but listed on COC <input type="checkbox"/> Samples received but NOT LISTED on COC <input type="checkbox"/> Logged based on Label Information <input type="checkbox"/> Logged based on info from other samples on COC <input type="checkbox"/> Logged according to Work Plan <input type="checkbox"/> Logged on HOLD UNTIL FURTHER NOTICE <input type="checkbox"/> Other: _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Will be noted on COC—Client to send samples with new COC <input type="checkbox"/> Mislabeled as to tests, preservatives, etc. <input type="checkbox"/> Holding time expired <input type="checkbox"/> Improper container used <input type="checkbox"/> Not preserved/Improper preservative used <input type="checkbox"/> Improper pH _____ Lab to preserve sample and document <input type="checkbox"/> Insufficient quantities for analysis

Comments

Corrective Action Implemented:

☐ Client Informed: verbally on _____ By: _____ In writing on _____ By: _____
☐ Sample(s) processed "as is." _____
☐ Sample(s) on hold until: _____ If released, notify: _____

Sample Control Supervisor Review:

Date: _____

Project Management Review:

Date: 2/7/02

SIGNED ORIGINAL MUST BE RETAINED IN THE PROJECT FILE